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**From: Winston Hsu, Registration No. 41,526**

**Serial No.: 10/829,338**

**Attorney Docket No.: SINP0010USA**

**Subject: Response to the Office Action mailed on 05/31/2005**

**Total Pages: 10 pages (including cover page)**

**Winston Hsu 08/24/2005**

**SINP0010USA0\_A2\_2**

PTO/SB/21 (09-04)

Approved for use through 07/31/2008. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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|   |                      |                        |             |
|---|----------------------|------------------------|-------------|
| <b>TRANSMITTAL<br/>FORM</b><br><br>(to be used for all correspondence after initial filing) | Application Number   | 10/829,338             |             |
|   | Filing Date          | 04/22/2004             |             |
|   | First Named Inventor | Renny Tse-Haw Ling     |             |
|   | Art Unit             | 3676                   |             |
|   | Examiner Name        | Lloyd A. Gall          |             |
| Total Number of Pages in This Submission  | 9                    | Attorney Docket Number | SINP0010USA |

| ENCLOSURES (Check all that apply)   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks _____   |  |  |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |   |                 |
|--|---|-----------------|
| Firm Name                                  | North America Intellectual Property Corporation |                 |
| Signature                                  | <i>Winston Hsu</i>                              |                 |
| Printed name                               | Winston Hsu                                     |                 |
| Date                                       | 8/24/2005                                       | Reg. No. 41,526 |

| CERTIFICATE OF TRANSMISSION/MAILING   |                    |                |
|---|--------------------|----------------|
| I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: |                    |                |
| Signature   | <i>Sammi Chang</i> |                |
| Typed or printed name   | SammiChang         | Date 8/24/2005 |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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|   |  |   |  |
|---|--|---|--|
| Effective on 12/08/2004.<br>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).<br><b>FEE TRANSMITTAL</b><br><b>For FY 2005</b> |  | <b>Complete If Known</b><br>Application Number 10/829,338<br>Filing Date 04/22/2004<br>First Named Inventor Renny Tse-Haw Ling<br>Examiner Name Lloyd A. Gall<br>Art Unit 3676<br>Attorney Docket No. SINP0010USA |  |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |  |   |  |
| TOTAL AMOUNT OF PAYMENT (\$ ) 0.00  |  |   |  |

|   |  |
|---|--|
| <b>METHOD OF PAYMENT (check all that apply)</b><br><input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____<br><input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 50-3105 Deposit Account Name: North America Intellectual Property Corp.<br>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)<br><input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee<br><input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments |  |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.  |  |

| <b>FEE CALCULATION</b>  |             |                       |   |                       |                                  |                       |                              |
|---|-------------|-----------------------|---|-----------------------|----------------------------------|-----------------------|------------------------------|
| <b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>  |             |                       |   |                       |                                  |                       |                              |
| Application Type  | FILING FEES |                       | SEARCH FEES   |                       | EXAMINATION FEES                 |                       | Fees Paid (\$)               |
|   | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)  | Small Entity Fee (\$) | Fee (\$)                         | Small Entity Fee (\$) |                              |
| Utility   | 300         | 150                   | 500   | 250                   | 200                              | 100                   |                              |
| Design  | 200         | 100                   | 100   | 50                    | 130                              | 65                    |                              |
| Plant   | 200         | 100                   | 300   | 150                   | 160                              | 80                    |                              |
| Reissue   | 300         | 150                   | 500   | 250                   | 600                              | 300                   |                              |
| Provisional   | 200         | 100                   | 0   | 0                     | 0                                | 0                     |                              |
| <b>2. EXCESS CLAIM FEES</b>   |             |                       |   |                       |                                  |                       |                              |
| <b>Fee Description</b>  |             |                       |   |                       |                                  |                       | <b>Small Entity Fee (\$)</b> |
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent  |             |                       |   |                       |                                  |                       | 50                           |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent   |             |                       |   |                       |                                  |                       | 200                          |
| Multiple dependent claims   |             |                       |   |                       |                                  |                       | 360                          |
| <b>Total Claims</b>   |             | <b>Extra Claims</b>   | <b>Fee (\$)</b>   | <b>Fee Paid (\$)</b>  | <b>Multiple Dependent Claims</b> |                       | <b>Fee (\$)</b>              |
| - 20 or HP = _____ x _____ = _____  |             |                       |   | <b>Fee (\$)</b>       |                                  | <b>Fee Paid (\$)</b>  |                              |
| HP = highest number of total claims paid for, if greater than 20  |             |                       |   |                       |                                  |                       |                              |
| <b>Indep. Claims</b>  |             | <b>Extra Claims</b>   | <b>Fee (\$)</b>   | <b>Fee Paid (\$)</b>  |                                  |                       |                              |
| - 3 or HP = _____ x _____ = _____   |             |                       |   |                       |                                  |                       |                              |
| HP = highest number of independent claims paid for, if greater than 3   |             |                       |   |                       |                                  |                       |                              |
| <b>3. APPLICATION SIZE FEE</b>  |             |                       |   |                       |                                  |                       |                              |
| If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |             |                       |   |                       |                                  |                       |                              |
| <b>Total Sheets</b>   |             | <b>Extra Sheets</b>   | <b>Number of each additional 50 or fraction thereof</b> |                       | <b>Fee (\$)</b>                  | <b>Fees Paid (\$)</b> |                              |
| - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____   |             |                       |   |                       |                                  |                       |                              |
| <b>4. OTHER FEE(S)</b>  |             |                       |   |                       |                                  |                       |                              |
| Non-English Specification, \$130 fee (no small entity discount)   |             |                       |   |                       |                                  |                       | <b>Fees Paid (\$)</b>        |
| Other: _____  |             |                       |   |                       |                                  |                       |                              |

|                               |   |                        |  |
|-------------------------------|---|------------------------|--|
| <b>SUBMITTED BY</b>           |   |                        |  |
| Signature <i>Winston Hsu</i>  | Registration No. 41,526<br>(Attorney/Agent) | Telephone 302-729-1562 |  |
| Name (Print/Type) Winston Hsu |   | Date 8/24/2005         |  |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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AUG 23 2005

**Branched Wire Lock**

Appl. No. : 10/829,338 Confirmation No. 6806  
Applicant : Renny Tse-Haw Ling  
Filed : 04/22/2004  
TC/A.U. : 3676  
Examiner : Lloyd A. Gall  
Docket No. : SINP0010USA0  
Customer No. : 27765

Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

**AMENDMENT**

Sir:

In response to the Office action of May 31, 2005, please amend the above-identified  
5 application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of  
this paper.

Remarks/Arguments begin on page 5 of this paper.